PR001 21-Apr-15

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration

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1. Accident Type:	2. Accident Classification				3. Date/Time of Accident 4. Date/T		4. Date/Time	of Death	5. Fatal Case No	
Fatal Injury	Slip or Fall of Person				06/14/201	2014 02:15 PM 07/2		014	27	
6. Mine Information :							-			
a) Mining Company Name b) Mine Name					c) Parent of Mining Company					
Diamond K Gypsum Inc			Chalk Hills Quarry Karen Palmer							
7. Mine Location : a) City			b) County		c) State 8. Mine II		8. Mine ID Nu	O Number: 9. Union:		
None			Emery		UT	UT		2077	NO	
10. Primary Mineral Mined:			ber of Mine plovees:	a) Total l	b) Underground	c) Open Pit	/Quarry	d) Mill/Prep Plant	e) Other	
GYPSUM MINING		Emp	noyees:	23			2	15	6	
12. Contractor Name:						13. Uı	nion	14. Contrac	ctor ID Number:	
15. Contractor Address:	a) City	7		ŀ	b) County	•	c) State	d) Z	ip Code	
16. Number of Contractor Em	ployees:	a) Total	b)	Underground	c) Op	en Pit/Quarry	d) M	1ill/Prep Plant	e) Other	
17. Number of Persons in Min	e at Time of Aco	eident:			18. Number	of Persons Unac	counted For:			
a) Mine Employees:	2	b) Contracto	or Employee	es: 0	a) Mine H	Employees:	0	b) Contractor Emp	ployees: 0	
19) Location of Accident								7	20. Mining Height:	
01-Underground	X	-		07-Advanc	· ·	30-Mill/Prej		Other (specify)	Feet Inches	
02-Surface at Undergrou		06-Dredge M	lining	08-Retreat	t Mining	99-Office Fa	cility			
21. Nonfatal Injuries:	0	Fatal Injuries:	1							
23. Victim Information:		a) Name			b) Age					
	Kevi	n Ames			35					
c) Regular Job Title:			d) Activity	at Time of Acc				X N	Iine Employee	
Laborer					Bagging/F	Paletizing				
Laborer 24. Experience: Years We	eeks Days		Years Wee	eks Days	Bagging/F	Paletizing Years Weel	s Days		Years Weeks Days	
24. Experience : Years We a) Total: 0	•	b) at the mine:		•	Bagging/F) with Contractor	Years Weeks Days	
24. Experience : Years Wo	•			•		Years Weel	0 d) 26. Mine Te	elephone No.:	Years Weeks Days	
24. Experience : Years We a) Total: 0	9 2			•		Years Weel	0 d) 26. Mine Te	·	Years Weeks Days	
24. Experience : Years Wo	9 2 If Yes, Locat	on	0 9) 2 c) a	at activity (23d)	Years Weel	O d) 26. Mine Te	elephone No.:	Years Weeks Days	
24. Experience : Years Wo	9 2 If Yes, Locat Include equipment Lee Ames, a 3 subsequently as mucormyco	nt involved, the 85-year-old la discovered b ssis (fungal ir	exact location of the control of the	ion in the mine, s using a propriker and trans ue to burns, a	and status of response torch to supported to a hound that the many	Years Weel 0 9 scue and recovery shrink-wrap pel spital. He died anner of death	0 d) 26. Mine Te y operations): letized gypsu on July 28, 2 was an accid	im when he recei 2014. The death of	ved serious burns on certificate indicated was not performed.	
24. Experience: Years We a) Total: 0 25. Autopsy Performed: NO 27. Description of Accident (in On June 14, 2014, Kevin 135% of his body. He was a that the cause of death was Based on the findings of the mining industry.	9 2 If Yes, Locat Include equipment Lee Ames, a 3 subsequently as mucormycon the death certification of the death certification	nt involved, the 85-year-old la discovered b ssis (fungal ir ficate and the	e exact locati aborer, was y a co-won nfection) d e MSHA in	ion in the mine, s using a prop rker and trans ue to burns, a evestigation, th	and status of response torch to a sported to a ho and that the mane Fatality Rev	Years Weel 0 9 scue and recovery shrink-wrap pel spital. He died anner of death view Committee	26. Mine Te y operations): letized gypsu on July 28, 2 was an accide determined	im when he recei 2014. The death of dent. An autopsy that the death sh	ved serious burns on certificate indicated was not performed. ould be charged to	
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